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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Joseph B. Kejha
Title	High Performance etc.
Art Unit	
Examiner Name	
Attorney Docket Number	1420P

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

 Practitioners associated with the Customer Number:

OR

 Practitioner(s) named below:

Name	Registration Number
Zachary T. Wobensmith, III	26,524

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

 The address associated with the above-mentioned Customer Number:

OR

 The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Law Offices Zachary T. Wobensmith, III			
Address	7746 101st Court			
City	Vero Beach	State	Florida	Zip 32967-2871
Country	USA			
Telephone	(772) 589-2073	Fax	(772) 589-2073	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

Signature		Date	9-26-2005
Name	Joel R. McCloskey	Telephone	
Title and Company	Applicant / Inventor		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 *Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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SIGNATURE of Applicant or Assignee of Record

Signature	<i>Joseph B. Kejha</i>	Date	9-26-2005
Name	Joseph B. Kejha	Telephone	
Title and Company	Applicant/Inventor		

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Title	High Performance etc.
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Telephone	(772) 589-2073	Fax	(772) 589-2073

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Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>W. Novis Smith</i>	Date	9-26-2005
Name	W. Novis Smith	Telephone	
Title and Company	Applicant/Inventor		

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney-Docket Number	1420P
First Named Inventor	<u>Joseph B. Kejha</u>
<i>COMPLETE IF KNOWN</i>	
Application Number	
Filing Date	
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HIGH PERFORMANCE AND SAFER ELECTROLYTES FOR LITHIUM-ION ELECTROCHEMICAL DEVICES

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 04/17/03 as United States Application Number or PCT International

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: The address associated with Customer Number: OR Correspondence address below

Name**Zachary T. Wobensmith, III****Address**

7746 101st Court

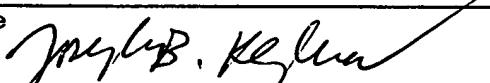
City Vero Beach	State Florida	ZIP 32967-2871
--------------------	------------------	-------------------

Country USA	Telephone (772) 589-2073	Email zwobensmith.pat law@prodigy.net
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--	---

Given Name (first and middle [if any]) Joseph B.	Family Name or Surname Kejha
---	---------------------------------

Inventor's Signature 	Date 9-26-2005
---	-------------------

Residence: City Meadowbrook	State PA	Country US	Citizenship US
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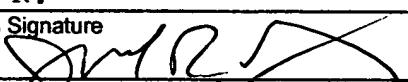
Mailing Address

1830 Columbia Avenue

City Folcroft	State PA	Zip 19032-0005	Country US
------------------	-------------	-------------------	---------------

NAME OF SECOND INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
---------------------------------	---

Given Name (first and middle [if any]) Joel R.	Family Name or Surname McCloskey
---	-------------------------------------

Inventor's Signature 	Date 9-26-2005
---	-------------------

Residence: City Philadelphia	State PA	Country US	Citizenship US
---------------------------------	-------------	---------------	-------------------

Mailing Address

1830 Columbia Avenue

City Folcroft	State PA	Zip 19032-0005	Country US
------------------	-------------	-------------------	---------------

Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
W. Novis		Smith	
Inventor's Signature	<i>W. Novis Smith</i>		Date <u>9-26-05</u>
Residence: City	PA State	US Country	US Citizenship
1830 Columbia Avenue			
Mailing Address			
Folcroft City	PA State	19032-0005 Zip	US Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

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